

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK


----- x
United States of America,

v.

Lorenzo Torres (01),

Defendant.
----- x

21-CR-466-01 (LAK)

copies mailed 3/18/25
Chambers of Judge Kaplan


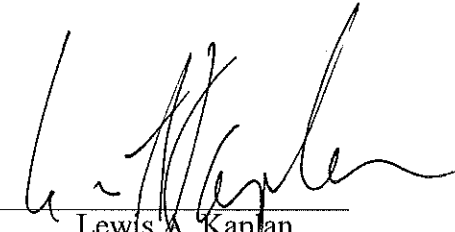
ORDER

LEWIS A. KAPLAN, *District Judge*.

In his March 5, 2025 letter to the Court, defendant Lorenzo Torres requests appointment of counsel in order to file a motion for compassionate release. Attached is a blank financial affidavit form that the defendant must complete and submit to the Court before being considered for appointment of counsel.

SO ORDERED.

Dated: March 18, 2025



Lewis A. Kaplan
United States District Judge

SDNY
CJA 23
(Rev. 1/12)**FINANCIAL AFFIDAVIT**

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT, OR OTHER SERVICES WITHOUT PAYMENT OF FEE

IN THE UNITED STATES ☐ DISTRICT COURT ☐ COURT OF APPEALS ☐ OTHER (Specify below)
IN THE CASE OF

FOR

AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

CHARGE/OFFENSE (describe if applicable & check box→)

☐ Felony☐ Misdemeanor

- 1 ☐ Defendant - Adult
 2 ☐ Defendant - Juvenile
 3 ☐ Appellant
 4 ☐ Probation Violator
 5 ☐ Supervised Release Violator
 5 ☐ Habeas Petitioner
 7 ☐ 2255 Petitioner
 8 ☐ Material Witness
 9 ☐ Other (Specify) _____

DOCKET NUMBERS

Magistrate Judge

District Court

Court of Appeals

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

INCOME & ASSETS	EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Self-Employed Name and address of employer: _____ IF YES, how much do you earn per month? \$ _____ IF NO, give month and year of last employment? _____ How much did you earn per month? \$ _____															
		If married, is your spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your spouse earn per month? \$ _____ If you are a minor under age 21, what is the approximate monthly income of your parent(s) or guardian(s)? \$ _____															
	OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No <table border="0"> <tr> <td></td> <td>RECEIVED</td> <td>SOURCES</td> </tr> <tr> <td>IF YES, give the amount</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>received and identify the</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>sources</td> <td>\$ _____</td> <td>_____</td> </tr> </table>		RECEIVED	SOURCES	IF YES, give the amount	\$ _____	_____	received and identify the	\$ _____	_____	sources	\$ _____	_____			
		RECEIVED	SOURCES														
IF YES, give the amount	\$ _____	_____															
received and identify the	\$ _____	_____															
sources	\$ _____	_____															
CASH	Do you have any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, total amount? \$ _____																
	PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No <table border="0"> <tr> <td></td> <td>VALUE</td> <td>DESCRIPTION</td> </tr> <tr> <td>IF YES, give value and</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>description for each</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td></td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td></td> <td>\$ _____</td> <td>_____</td> </tr> </table>		VALUE	DESCRIPTION	IF YES, give value and	\$ _____	_____	description for each	\$ _____	_____		\$ _____	_____		\$ _____	_____
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IF YES, give value and	\$ _____	_____															
description for each	\$ _____	_____															
	\$ _____	_____															
	\$ _____	_____															

OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated or Divorced Total No. of Dependents _____ List persons you actually support and your relationship to them _____ _____ _____ _____														
	DEBTS & MONTHLY BILLS (Rent, utilities, loans, charge accounts, etc.)	<table border="0"> <tr> <td>DESCRIPTION</td> <td>TOTAL DEBT</td> <td>MONTHLY PAYMENT</td> </tr> <tr> <td>_____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>_____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>_____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>_____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table>	DESCRIPTION	TOTAL DEBT	MONTHLY PAYMENT	_____	\$ _____	\$ _____	_____	\$ _____	\$ _____	_____	\$ _____	\$ _____	_____	\$ _____
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_____	\$ _____	\$ _____														
_____	\$ _____	\$ _____														
_____	\$ _____	\$ _____														
_____	\$ _____	\$ _____														

I certify under penalty of perjury that the foregoing is true and correct.

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Date



APPROVED



DENIED

FD/CJA/RET. ATTORNEY

(PRINT)

ASSISTANT UNITED STATES ATTORNEY (PRINT)

SIGNATURE OF JUDICIAL OFFICER

DATE